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7590

05/06/2004

Kris T. Fredrick  
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<u>Diane A. Andrins</u>	(Depositor's name)
<u>Diane A. Andrins</u>	(Signature)
<u>August 5, 2004</u>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/652,332	08/29/2003	Michael J. Skarlupka	H0004843	1617

TITLE OF INVENTION: TOGGLE SWITCH COVER APPARATUS AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/06/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
FRIEDHOFFER, MICHAEL A	2832	200-335000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kris T. Fredrick  
2 Kermit D. Lopez  
3 Luis M. Ortiz

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Honeywell International Inc.

Morristown, New Jersey

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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(Authorized Signature) Kris T. Fredrick (Date) 8/3/04

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08/10/2004 MHEKONE1 00000096 011125 10652332

01 FC:1501 1330.00 DA  
02 FC:1504 300.00 DA